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FACSIMILE TRANSMISSION

TO: Commissioner for Patents DATE: October 26, 2005

FROM: W. Thad Adams, III FACSIMILE NO: (571) 273-8300
Reg. No. 29,037

RE: **Our File No. 3282/30US; U.S. Patent Application Serial No. 10/713,824 for "KIT FOR THE TREATMENT OF A CORN OR A CALLUS"**

CONFIRMATION COPY

TO FOLLOW: YES _____ NO ✓

NUMBER OF PAGES: Cover + 2

MESSAGE: Please see the REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS for U.S. Serial No. 10/713,824.

Also, please confirm receipt of this facsimile. Thank you.

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PTO/SB/21 (09-04)

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TRANSMITTAL
FORM

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Total Number of Pages in This Submission

3

Application Number

10/713,824

Filing Date

11/14/2003

First Named Inventor

NASH, Alan E.

Art Unit

1616

Examiner Name

Attorney Docket Number

3262/30US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name
ADAMS EVANS P.A.

Signature

Printed name
W. Thad Adams, IIIDate
10/26/2005

Reg. No.

29,037

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Cecilia M. Sidebottom

Date

10/26/2005

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/713,824
	Filing Date	11/14/2003
	First Named Inventor	Alan E. Nash
	Art Unit	1818
	Examiner Name	
	Attorney Docket Number	3282/30US

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

23638

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
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Individual Name

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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Alan E. Nash

Date

10-2-05

Telephone

(781) 344-3211

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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